Evaluation of Job Satisfaction and Job Related Stress Among Community Pharmacists in North Khartoum and its Impact on Providing Pharmaceutical Care Services

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Abstract

Introduction: Pharmacists and pharmaceutical care services are among the most important tools in providing health services to the society. Pharmacists as the key players in presenting health services, critically impact on the health of the society and if they suffer low job satisfaction, their dissatisfaction may relatively threaten health in the society. This study was conducted to determine Sudanese community pharmacists' job satisfaction and additionally, some causes of dissatisfaction among community pharmacists and their impact on providing pharmaceutical care services have been evaluated.

Method: The questionnaire was designed after reviewing relevant Literature in addition, The Job Satisfaction survey was used to measure the level of community pharmacists' satisfaction with their current jobs, and the Toronto Alexithymia Scale (TAS-20) was used to evaluate emotional experience and awareness.

Results and Discussion: Generally low scores of job satisfaction were concluded among pharmacists while most of them were highly satisfied with being pharmacist.

Conclusion: Low levels of job satisfaction which were found among Sudanese community pharmacists could be considered as a deficiency of health system in Sudan. Fortunately, inherent interest in the pharmacy profession found among Sudanese pharmacists is an optimistic point at which policy-makers could develop their modifying policies. Health policy-makers must endeavor to take other steps to issue solutions for this current problem.

Introduction

Job Satisfaction: Definitions and Facts

Employee job satisfaction is the fulfillment, gratification, and enjoyment that comes from work. It is not just the money or the fringe benefits, but the feelings employees receive from the work itself. The most used research definition of job satisfaction is by Locke who defined it as "a pleasurable or positive emotional state resulting from the appraisal of one's job or job experiences." Implicit in Locke's definition is the importance of both effect, or feeling, and cognition, or thinking. When we think, we have feelings about what we think [1].

Schermerhorn define job satisfaction as the degree to which individuals feel positive or negative about their jobs [2]

The ability to produce, the quality of the work, the opportunity to learn and express creativity, the sense of pride in their profession, the recognition for a job well done, the ability to work well in a team, the social satisfaction derived from relationships at work, the opportunity to experience personal growth and the rewards from a physically supportive work environment, and autonomy are all factors that impact job satisfaction [3–4]

Job Satisfaction Among Community Pharmacy Professionals

Pharmacist job satisfaction, or dissatisfaction, plays a major role in many aspects of community pharmacy practice [5–6]

An article by Saari et al. demonstrates that poor job satisfaction is directly associated with performance, especially for professionals like pharmacists. [5]

These performance problems can include incorrectly filling prescriptions, not detecting drug interactions and poor patient counseling. Thus, dissatisfaction may also affect the way that patients view the pharmacist and patients may then be inclined limit their interactions with the pharmacist. [7] It is important to realize that a decrease in pharmacist performance could cause patient harm or even death. [8–9]

If a pharmacist is dissatisfied with his/her career, there is a potential for increased job turnover. [5,10] Pharmacists job satisfaction has been found to be negatively associated with job turnover [10], that is pharmacists with low levels job of satisfaction are more likely to resign their positions [10–12]

Pharmacist job satisfaction does not only affect the pharmacist at his/her workplace, but has the potential to affect many other aspects of his/her pharmacist life. Research suggests that there is a strong link between job satisfaction and overall life satisfaction. [8] If a pharmacist is not satisfied with his/her work he/she may bring those ill feelings from their job home and allow them to affect his/her life outside of the work place.

Justification

This study was conducted to serve the expansion of pharmacy in Sudan, growth in pharmacy graduates, high expenditure on human resource training and most importantly emphasize the vital role of pharmacists in providing pharmaceutical care services, and this study will determine the level of job satisfaction through various aspects of pharmacy practice among Sudanese community pharmacists.

Furthermore, some satisfaction or dissatisfaction causes among pharmacists will be assessed which may help decision makers to focus on these elements when aiming at the improvement of health care provision.

Objectives

General Objectives

Identification of the level of job satisfaction among community pharmacists in relation to environmental, socio-demographic, and individual factors and assessment of occupational stress and its implications for pharmacist's well-being and patient safety.

Specific Objectives

To explore any association between pharmacists' workload, job satisfaction and stress.

To explore the factors related to job related stress and dissatisfaction among community pharmacists.

Methodology

Study Design

This is a descriptive cross-sectional study to

measure Sudanese community pharmacists' job satisfaction and its impact on providing pharmaceutical care services.

Population and Sample

Data collection involved a descriptive cross-sectional survey of a random sample (SRS) of practicing registered community pharmacists in north Khartoum region within 30 days' period. Study was carried out with a random sample of 50 community pharmacy which represented 25% of total number of pharmacies in the chosen area.

Sampling was done through simple random method

Methods and Techniques

Ethical approval was obtained from the Ethical Committee of the Faculty of Pharmacy, National University –Sudan, as this study was undertaken as part of a postgraduate degree.

This study was conducted in Khartoum State. Because of the large geographical size of Khartoum state, the limited and unreliable postal system, and areas of conflict, this study was limited to Khartoum State – eastern region only.

The questionnaire was designed after reviewing relevant Literature in addition,

The Job Satisfaction survey was used to measure the level of community pharmacists' satisfaction with their current jobs, and the Toronto Alexithymia Scale (TAS-20) was used to evaluate emotional experience and awareness.

Questionnaires were paper type and numbered consecutively to allow monitoring of return, and validated though pilot study, on small community to know ease of question.

Data Analysis

The collected data was cleared, organized and imported into excel data sheet.

Descriptive analysis has been performed to all variables where frequencies and percentage were used to express categorical variables. Charts and graphs were used to give better representation of data. Analysis was conducted using Statistical Package for the Social Sciences IBM SPSS Statistics Version 23. With confidentiality, maintained by separate storage of return information and survey data in password-protected databases.

Inclusion/Exclusion Criteria

Inclusion

registered practicing community pharmacists in north Khartoum region.

Exclusion

trainees.

Results

Tables 1-6

Figures 1-6, Graphs 7-10

Table 1. Represents underpaying assessment of community pharmacists in the study		
	Frequency	Percent
No	6	12.0
Yes	44	88.0
88% of community pharmacists in this study felt underpaid while 12% felt satisfied		

Table 2. Represents salary fulfillment for community pharmacists in the study		
	Frequency	Percent
No	43	86.0
Yes	7	14.0
86% of community pharmacists in the study stated that salaries are not fulfilling their basic needs		

Table 3. Represents assessment of need for more than job is providing

	Frequency	Percent
No	3	6.0
Yes	47	94.0

94% of community pharmacists needed more while 6% were satisfied

Table 4. Represents consideration of career change for over six months

	Frequency	Percent
No	18	36.0
Yes	32	64.0

64% of community pharmacists considered career change while 36% did not

Table 5. Represents mental shutdown status of community pharmacists from job

	Frequency	Percent
No	25	50.0
Yes	25	50.0

The 50% of community pharmacists specified that they were previously psychologically stoppage from their jobs

Table 6. Represents effect of workload on making wrong medical decisions

	Frequency	Percent
No	23	46.0
Yes	27	54.0

54% of community pharmacists stated that workload had an effect on making wrong medical decisions
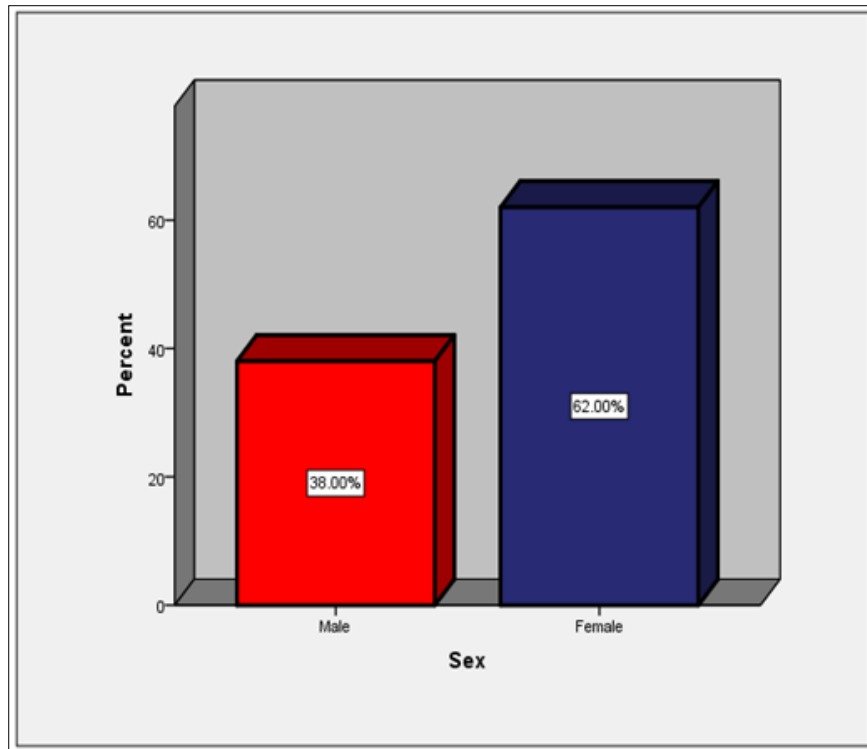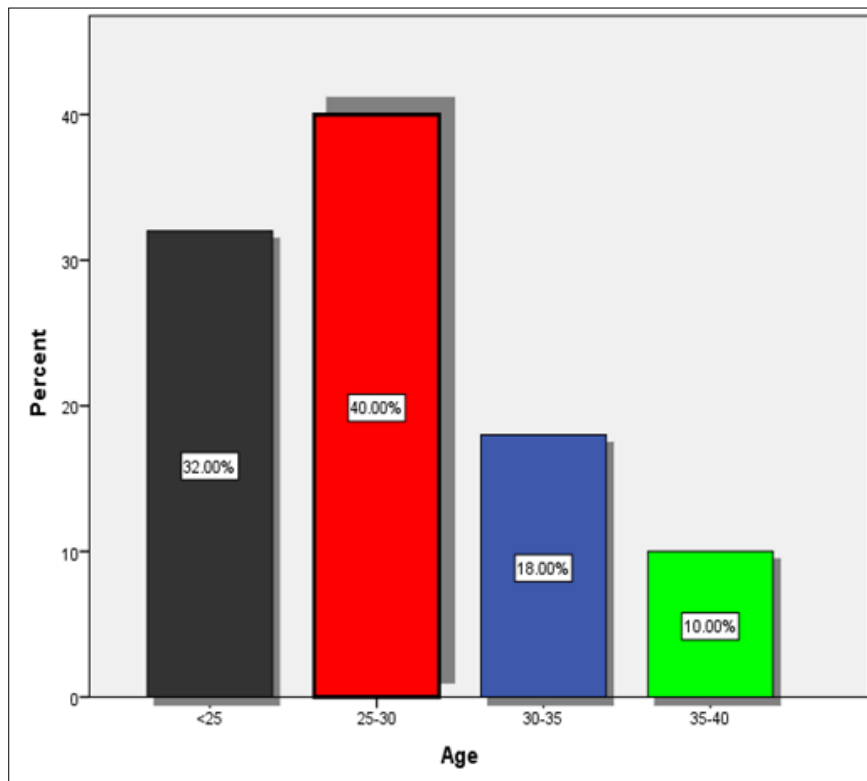
Figure 1. Represents gender
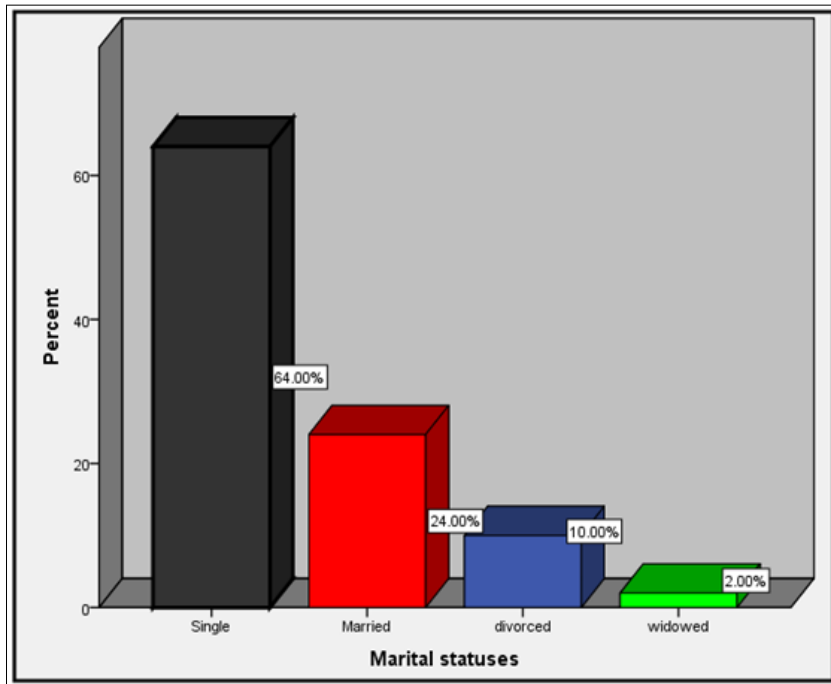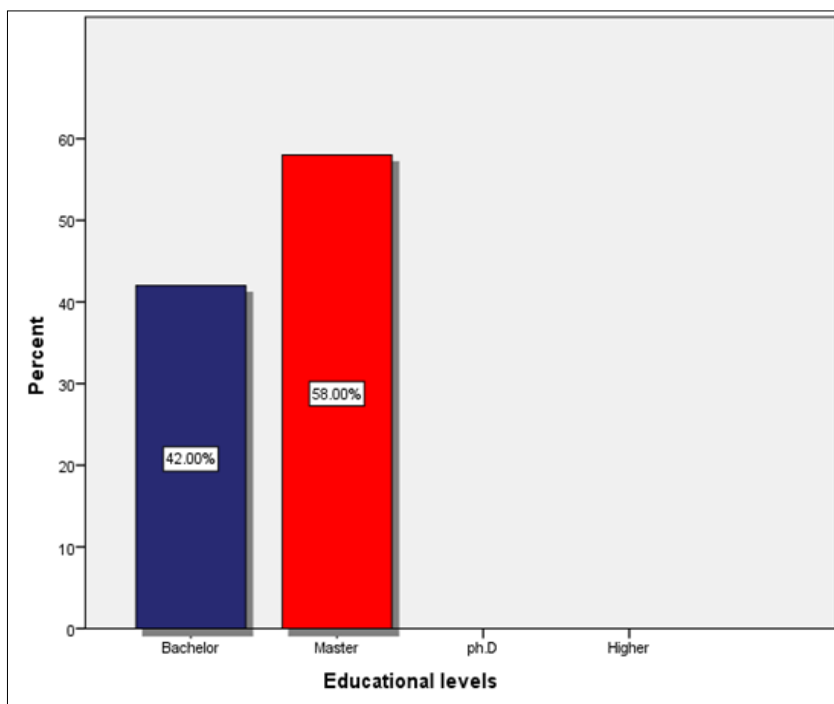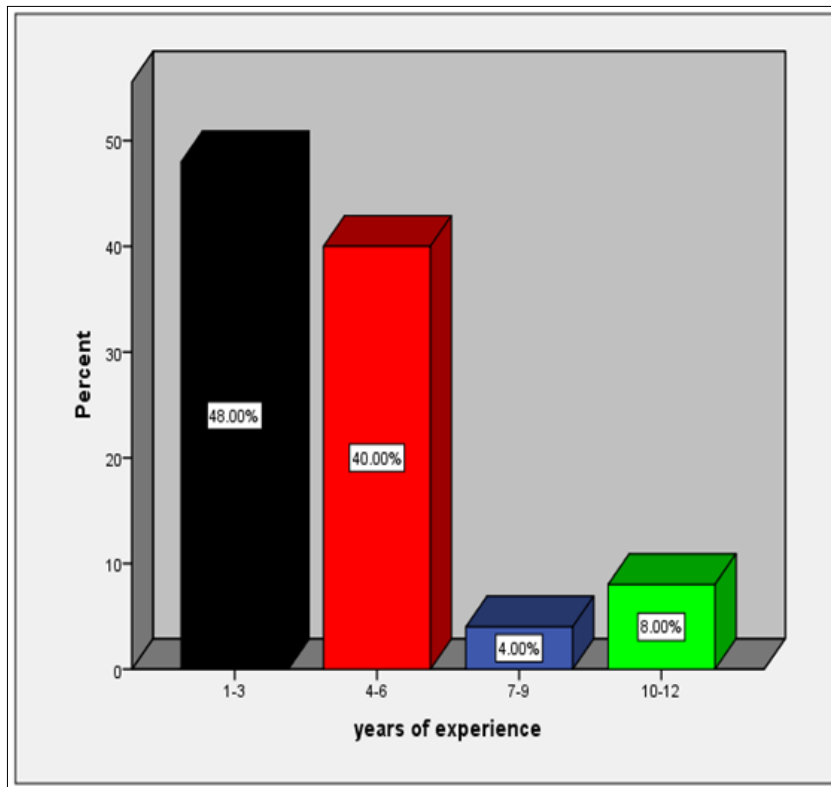

Figure 2. Represents age

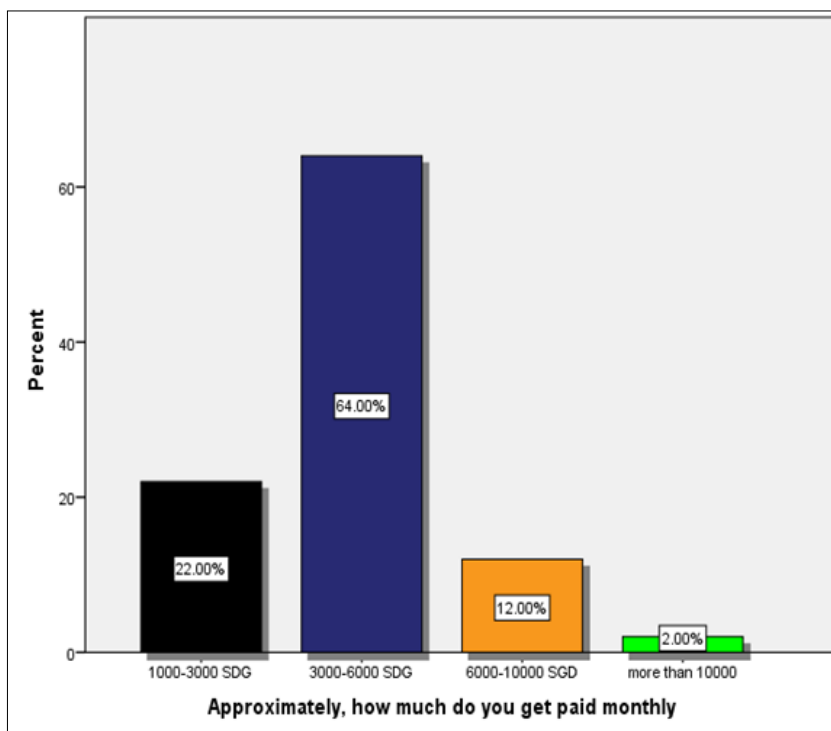Figure 3. Represents Martial status

Figure 4. Educational level
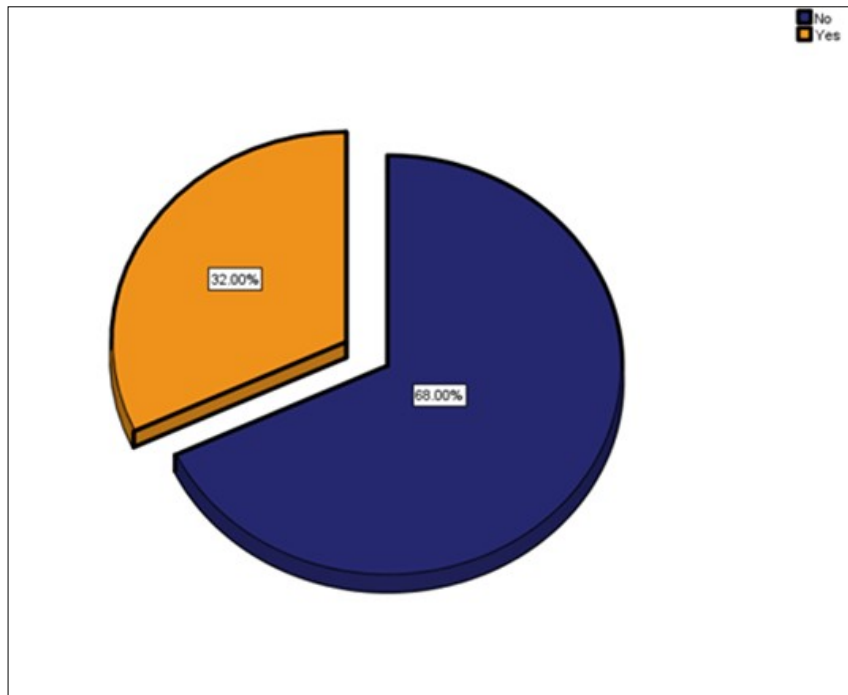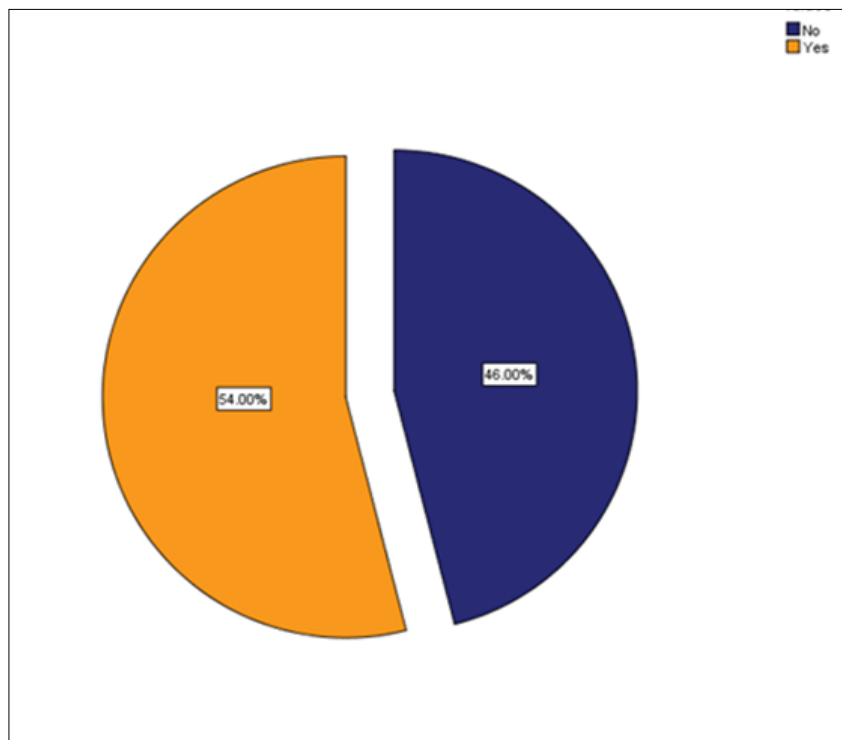
Figure 5. Years of experience

Figure 6. Represents salary

Graph 7. represents vacancy to attend and get engaged in personal interests

86% of community pharmacists didn't find time to attend or get engaged in personal interests

Graph 8. represents community pharmacists trust of their organization leadership team

54% of community pharmacists stated that they trust their leadership team
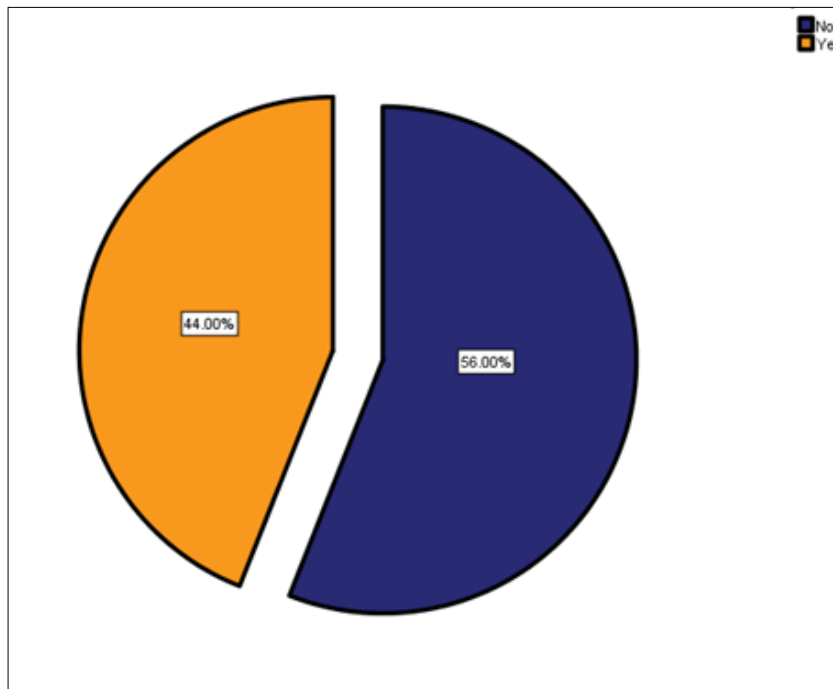
Graph 9. represents community pharmacist opportunities to learn and gain new skills within work environment

56% of community pharmacists stated that they didn't find opportunities to gain new skills within work
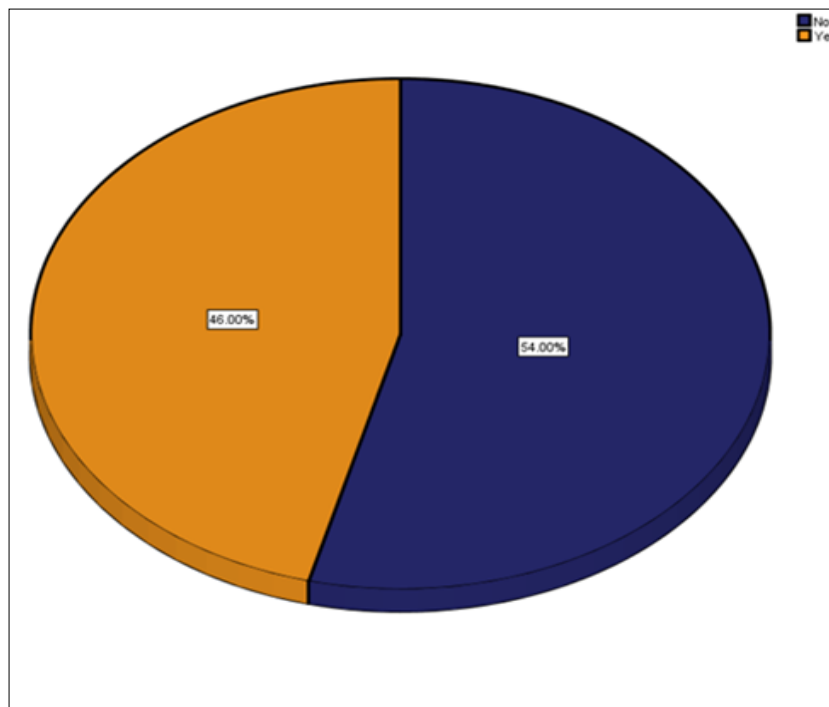
Graph 10. represents creativity and innovation support within work places

54% of community pharmacists stated that creativity and innovation were not supported in their organizations

Discussion

In this study the majority of community pharmacists were found to be females (62% females, 38% males), with an average age of 25-30 representing 40% of this study sample. 64% of those community pharmacists were single, 58% were master degree holders with average years of experience of 3-6 years in community pharmacies. Most salaries of community pharmacists were found to fall below 6000 SDG (64%).

This reduction in salaries explains aversion of many pharmacists and especially male pharmacists to this field of pharmacy, especially when it's compared to other pharmacy fields where opportunities are much higher. Previous studies revealed that younger pharmacists were less satisfied with their jobs and males were less satisfied than females. 88% of community pharmacists were underpaid in their opinion with salaries unfulfilling their basics needs and increasing job requirements and tasks in the other hand; which leaves a marked imbalance. 64% of community pharmacists considered career change to other fields or organizations in-order to cope with life style modifications, fulfill basic needs and improve economical state and take their career to the next level which have a great effect on the society as well. As the literature showed; pharmacists' job dissatisfaction in UK leaded to one in four employees considered dropping their jobs.

Regarding community pharmacy; promotions are decreased, job security is an issue of concern for 54% of community pharmacists as this job has a narrow room for development and 62% of those pharmacists were feeling unappreciated within work places even when they are working hard to provide professional pharmaceutical care to their patients. 62% of community pharmacists assured that workload is negatively affecting their health (sharpened temper, increased number of errors, reduced quality of services) and keeping them from meeting their goals due to prolonged working hours and crowded work environment, low promotions, lack of provision and other factors. Similar results obtained from the literature confirming that community pharmacists were willing to implement pharmaceutical care services but increased workload, elevated pressure and poor relation with physicians reduced the quality of the provided service.

Most of community pharmacies depend on pharmacists to perform al tasks, which is unreasonable; there has to be some assistant staff members to perform tasks that don't require direct contact with the patient which has to be performed only by the pharmacist himself. The literature suggested exclusion of services other than pharmaceutical services that may include beauty services, ear piercing and others. Assistant's availability takes place mainly in other states of Sudan with lower proportion in Khartoum community pharmacies. This issue needs more studies to make it viable and effective to serve the community's good. 50% of community pharmacists were already mentally shut down from this job; this level of frustration reveals how intense the situation is and requires attentions and vital solutions to uplift community pharmacy profession.

Community pharmacies are not well equipped with tools and references or prepared to serve the goal they are meant to achieve, counseling with patients is a vital role of community pharmacists, this role is out of reach and 56% of community pharmacists stated that they don't find enough time to council with their patients and encounter prescriptions sufficiently due to the limited space in pharmacies, preserved nature of patients and other factors which increase the risk of pharmaceutical errors regarding dispensing of medications which may sometimes be fatal and require close monitoring and advising. Some cases were seen and told by community pharmacists who participated in this study but patients families refused to document it or were out of reach for this study. Half of community pharmacists in this study had an impaired transparency with their patients as well which leaded occasionally to make pharmaceutical errors and taking wrong decisions. Some of those errors were serious and fatal as many patients suffered the consequences.

64% of pharmacists in this study handled with patients in an unprofessional attitude due to workload pressure within community pharmacies. This pressure may refer to other factors besides patients themselves, which may be referred to staff issues, unequipped pharmacies to provide the services good enough, or pharmacist preoccupation by other tasks, number of prescriptions encountered daily, type of services they are among providing and other factors. The previous studies suggested that similar factors impacted

negatively on quality of services and dispensing accuracy and acted as a barrier to practice change.

46% of community pharmacists committed serious pharmaceutical mistakes, they don't represent the majority but this percent needs to shed a light on those pharmaceutical errors as it represents almost half of the populations and must be taken into consideration to overcome this issue. The literature showed similar results as dissatisfaction resulted in increased number of errors.

54% of community pharmacists in this study looked forward to attend work every day out of admiring what they do and knowing the importance of their role in providing health care services to the community they belong to. They try to interact positively throughout their working hours, interfere with prescriptions, analyze them, provide quality service, and apply guidelines and therapeutics plans. But other irrelevant tasks render this performance sometimes impossible to achieve, it even may affect pharmacists beyond their working hours; 68% of community pharmacists stated that this influences their ability to engage in social events, personal interests and goal achieving as it's a totally consuming job with no specific job description to save time and effort for the pharmacist, the patients and work organization.

Regardless of community pharmacists concerns that their values didn't fit with their organizations values (54%), 72% of them still believe that they are involved in a meaningful work as they look forward to promote rational use of medicines and implement and provide pharmaceutical health care services as best as possible. Still, the interests of employers and employees do not always coincide. As these organizations or pharmacies apply more irrelevant tasks and technical responsibilities to pharmacists to reduce the number or employees, increase their income, increase sales and put the load on community pharmacist's shoulder without giving them enough room to develop as a pharmacist professional or support innovation to invent new methods and tools to provide the best outcomes which both of them can benefit from the organization and the pharmaceutical arm (the pharmacist and the patient).

Working in community pharmacies requires team work, organized plans and focus. It's a continuous learning and gaining process, managers and organizations leadership requires continuous assessment and evaluation of pharmacists' performance and other staff members' progression. Community pharmacists have to assert their rights and roles and get them clearly identified. They also need to institute a well-established definition for their job description as there is no universal differentiating definition in the literature that describes their exact job role and list entire activities [12]

Conclusion and Recommendations

Conclusion

Low levels of job satisfaction which were found among Sudanese community pharmacists could be considered as a deficiency of health system in Sudan. Community pharmacists were in favor of implementing.

Pharmaceutical care but reported a number of barriers. The most significant were lack of support from other health care providers, staff members and managers. Beside, lack of qualified support staff, professional practice standards, specific training and remuneration. Fortunately, inherent interest in the pharmacy profession found among Sudanese pharmacists is an optimistic point at which policy-makers could develop their modifying policies. Health policy-makers must endeavor to take other steps to issue solutions for this current problem.

Recommendations

Pharmacist's job satisfaction should be enhanced by both governmental and private sectors to improve pharmacist's motivation and competence; consequently, this will improve their productivity and provision of pharmaceutical care.

Exact job description has to be re-evaluated and well stated from legal authority, improve pharmacies environment to assist in providing professional services that suffice patients' and community's needs. Salaries have to be raised reasonably to match other pharmacy specialties, or correspond with community pharmacy profession role and requirements, and should be fixed and determined by superior commission.

Strategic plans need to be established to overcome these problems based on the cooperation of all stakeholders in order to capitalize on the willingness of community pharmacists to extent their role.

Promotions, ranking and incentives should coincide with pharmacist's performance, working hours, extra tasks and experiences. A connection panel between pharmacists and other professional health care providers has to be established to benefit from one another and promote rational use of medicines.

Declaration

The Researchers declare that the subject matter presented in this thesis is original and has only been submitted to the National University –Sudan to obtain degree of Master in Hospital Pharmacy.

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